09/22/89 Shipper 15654 State of California—Health and Welfare Agency Form Approved OMB No. 2050—0039 (Expires 9-30-91) Department of Health Services Toxic Substances Control Division Secremento, California See Instructions on Back of Page 6 and Front of Page 7 Please print or type. (Form designed for use on elike (12-pitch typewriter). 1. Generator's US EPA ID No. 2. Page 1 UNIFORM HAZARDOUS Manifest Information in the shaded areas **Document No** WASTE MANIFEST CA |D| 0 1 0 1705 14 13 is not required by Federal law. 3. Generator's Name and Mailing Address A: State Manifest Document Number 88614869 Librascope Corp. 4 G833 Sonora Ave., Glendale, CA 91201 5. Transporter 1 Company Name 502 8080 US EPA ID Number C. State Transporter's ID CAD 042 245 001 D. Transporter's Phone 213/698-0991 Omega Recovery Services 1-800-852 7. Transporter 2 Company Name US EPA ID Number E. State Transporter's ID F. Transporter's Phone 9. Designated Facility Name and Site Address US EPA ID Number Omega Recovery Services ADDY2245001 88614863 12504 E. Whittier Blvd. 213/698-0991 Whittier. CA 90602 ICAD 042 |2 |45 |001| 12. Containers 13. Total Quantity 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) Туре No. Waste 111 Trichloroethane ORM-A y party 001 UN 2831 DN G an Xtitet 00101515 Waste paint related material N.O.S. Stell 212 1-800-424-8802: NA 1263 (paint thinner) EHE STORY OPIZOM GIOINES Flammable Liquid UN 1090 212 Waste Acetone Flammable Liquid 001 EPA/Other FOU3 DIDIDISI CENTER State 2 1 2 Waste Isopropyl Alcohol UN 1221 002 G Flammable Liquid DN TO OTHER RESPONSE J. Additional Descriptions for Materials Listed Above NATIONAL 15. Special Handling Instructions and Additional Information Profile Nos. A13588, A13589, A13590, A14344, A1 4345, A14346, A14347, Z A14348, A13593. Z S 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford. 8 Printed/Typed Name Month Day Signature Year KOBERT 11100318F Month Day Printed/Typed Na CIRINA t 120038P 18. Transporter 2 Acknowle doement of Receipt of Materials Printed/Typed Name Signature Month Day Year 19. Discrepancy Indication Space 20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Month Day HS 8022 A (1/88) Do Not Write Below This Line PA 8700—22 Nev. 9-86) Previous editions are obsolete. White: TSDF SENDS THIS COPY TO DOHS WITHIN 30 DAYS

To: P.O. Box 3000, Sacramento, CA 95812